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FIRST NAMED INVENTOR

Susan B. Cirulli

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FILING DATE

10/17/2003

23389

APPLICATION NO

10/687,718

7590

07/10/2008

SCULLY SCOTT MURPHY & PRESSER, P 400 GARDEN CITY PLAZA SUITE 300 GARDEN CITY, NY 11530



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CONFIRMATION NO.

3283

ATTORNEY DOCKET NO.

END920030061US1

APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional NO \$1440 \$300 \$0 \$1740 10/10/2008 EXAMINER ART UNIT CLASS-SUBCLASS ALLEN, WILLIAM J 3625 705-026000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). KYChange of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. KYC Fee Address" indication (or "Fee Address" Indication form PTO/SB/1720 attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been fire recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines Corporation Please check the appropriate assignee category or categories (will not be printed on the patent): Individual XX Corporation or other private group entity Individual Corporation or other private group entity Individual Corporation or other private group entity Individual Individual Individual XX Corporation or other private group entity Individual Corporation or other private group entity Individual Corporation or other private group entity Individual In	TITLE OF INVENTION: SYNC	HRONOUS ELE	ECTRONIC REQUISIT	TON PROCESSING METH	ODS 10/10/2038	ANUUDAAD) 00900031 09	90457 10687718
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been firecordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) International Business Machines Corporation Armonk, New York	EXAMINER		ART UNIT	CLASS-SUBCLASS			
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Authorized Signature Date August 22, 2008		Oto	Fiel				
Typed or printed nameSteven Fischman, Esq. Registration No34,594	Typed or printed name	Steve	n Fischman, E	Esq.	Registration No.	34,594	

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(Signature)	
(Date)	

APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY	DOCKET NO.	CONFIRMATION NO.
10/687,718 TITLE OF INVENTION	10/17/2003 : SYNCHRONOUS ELI	ECTRONIC REQUISITION	Susan B. Cirulli ON PROCESSING METH	ODS		30061US1 846)	3283
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOT	AL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0		\$1740	10/10/2008
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ALLEN, W	/ILLIAM J	3625	705-026000				
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